

THE POLICY

PAGES *Responses to Questions as Received by the Infant & Toddler Connection of Virginia*

July, 2001

Q: Please provide clarification of Federal requirements for screening and identification.

A: When Virginia's Policies and Procedures for the Implementation of Part C of the Individuals with Disabilities Education Act (IDEA) -- 2000 were submitted to OSEP in December, 2000, OSEP identified a need to change our policies related to identification and referral for evaluation and assessment. OSEP indicated that, under the existing Virginia policies, screening could be used to delay the intended start of the 45-calendar day timeline for IFSP development. New wording for the policies has been approved by OSEP and is reflected in Component V, Comprehensive Child Find System (E.1.c). What follows is further explanation for the reasons these changes were made and information to support local implementation of the new policies.

Virginia's Part C Policies and Procedures now state the following related to identification and referral for evaluation and assessment (new language is bolded):

The Lead Agency ensures that referrals for a multidisciplinary/interdisciplinary/transdisciplinary evaluation are made no more than two (2) working days after a child has been identified.

Note: Individual child screening is not a mandatory procedure prior to multidisciplinary/interdisciplinary/transdisciplinary evaluation and assessment and may not be used to extend the 45-day timeline for IFSP development.

In addition to these changes, the section in Virginia's Policies and Procedures - 1999 that related solely to screening (Component V Section D) has been eliminated in order to reflect the fact that screening is not a required Part C service and to reduce confusion about the need for individual child screening prior to evaluation and assessment. Screening is considered a child find activity under Part C and is discussed in General Child Find System Requirements (Component V, Section A).

In terms of local implementation, these changes clarify that once a primary referral source ``identifies`` that a child may have a delay or needs further evaluation then that individual or agency must, within 2 working days, make a referral to the local central point of entry for the Part C system (as identified in local policies and procedures). Examples of how identification might occur include a pediatrician, WIC nurse or child care provider realizing a child may need an evaluation or the parent getting worried that his/her child seems to be attaining skills more slowly than other children that age.

The policy change also means that as soon as a child and family are referred by a parent or any referral source to the local Part C system through the local central point of entry, this is considered a referral for evaluation and assessment; and the 45-calendar day timeline begins. Since screening is considered a child find activity under Part C, it is expected that many, if not most, children will have received a screening (or will have a diagnosed physical or mental condition that has a high probability of resulting in a developmental delay) prior to being referred to the local Part C system, i.e. prior to referral for evaluation and assessment. Such screening might have occurred through mechanisms such as mass general screenings, well-baby checks, individual child screenings, records/chart review, documentation of needs by primary referral sources, and parent observation and report. Screening is not required, however, prior to referral for or conducting Part C evaluation and assessment. Even for those children who reach the point of being referred for evaluation without screening information and without a diagnosed physical or mental condition that has a high probability of resulting in a developmental delay, the 45 calendar day time line begins immediately upon referral.

In those situations when a child is referred for evaluation and individual screening is necessary in order to determine the need for a team evaluation and assessment (i.e. when the child does not have a diagnosed physical or mental condition that has a high probability of resulting in a developmental delay and has had no screening prior to referral), then screening may be done; the evaluation and IFSP development must also still be completed within 45 calendar days of the time the child was referred to the local Part C system. In addition, when the screening occurs after referral for evaluation, prior notice and parental consent forms must be completed before screening is conducted.

Even if a parent calls the local central point of entry requesting just a screening, this must be considered a referral for evaluation and assessment under federal Part C regulations and Virginia's Policies and Procedures. Screening may be conducted, but prior notice and parental consent requirements must be met, and local procedures must ensure that if screening indicates the need for evaluation, then team evaluation and assessment and IFSP development for this child and family are conducted within 45 calendar days of the time the parent originally called requesting the screening.

If you have further questions regarding this policy change and how it impacts your locality, please feel free to contact your Part C Technical Assistance Consultant for technical assistance.

